



12-27-05

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# TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

|                        |                      |
|------------------------|----------------------|
| Application Number     | 10/630,427           |
| Filing Date            | July 29, 2003        |
| First Named Inventor   | Wendell P. Noble     |
| Art Unit               | 2813                 |
| Examiner Name          | Laura M. Schillinger |
| Attorney Docket Number | MI22-2378            |

Total Number of Pages in This Submission

## ENCLOSURES (Check all that apply)

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input checked="" type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br><input type="checkbox"/> Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Return Receipt Postcard<br>PTO-Form 1449 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

Remarks

Customer No. 021567

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|              |                     |          |        |
|--------------|---------------------|----------|--------|
| Firm Name    | Wells St. John P.S. |          |        |
| Signature    | <i>[Signature]</i>  |          |        |
| Printed name | Robert C. Hyta      |          |        |
| Date         | 12/23/05            | Reg. No. | 46,791 |

## CERTIFICATE OF TRANSMISSION/MAILING

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| Signature             | Filed via Express Mail, Receipt No. EV 633203285 US |      |  |
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This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Serial No. .... 10/630,427  
Filing Date ..... July 29, 2003  
Inventor..... Wendell P. Noble  
Assignee ..... Micron Technology, Inc.  
Group Art Unit..... 2813  
Examiner ..... Laura Schillinger  
Attorney's Docket No. .... MI22-2378  
Customer No. .... 021567  
Title ..... Methods of Forming Conductive Lines

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

Reference - - See attached Form PTO-1449

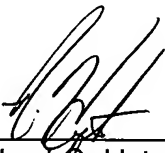
The attached Form PTO-1449 is submitted in compliance with 37 C.F.R. §§ 1.56, 1.97 and 1.98. Pursuant to Federal Register Vol. 69, No. 182, pg. 56542 (September 21, 2004), no copies of any cited U.S. patents or U.S. published applications are included herewith. No admission is made regarding whether the submitted reference is prior art.

This Supplemental Information Disclosure Statement is being filed after the filing of the Request for Continued Examination (RCE) Application and before receipt of the first Office Action. Therefore, no fee is believed to be required. However, in the event that a fee is required for filing this Supplemental Information Disclosure Statement, please charge the fee specified under 37 C.F.R. § 1.17(p) to Deposit Account No. 23-0925

Citation of this reference is respectfully requested.

Respectfully submitted,

Date: 12/23/05

  
\_\_\_\_\_  
Robert C. Hyta  
Reg. No. 46,791

Form PTO-1449

U.S. DEPARTMENT OF COMMERCE  
PATENT AND TRADEMARK OFFICEATTY. DOCKET NO.  
MI22-2378SERIAL NO.  
10/630,427LIST OF ART CITED BY APPLICANT  
(Use several sheets if necessary)

APPLICANT: Wendell P. Noble

FILING DATE  
July 29, 2003GROUP  
2813

## U.S. PATENT DOCUMENTS

| *Examiner's<br>Initials |    | Document<br>Number | Date  | Name                   | Class | Subclass | Filing Date<br>If Appropriate |
|-------------------------|----|--------------------|-------|------------------------|-------|----------|-------------------------------|
|                         | AA | 4,983,544          | 01/91 | Lu, et al.             |       |          |                               |
|                         | AB | 5,223,447          | 06/93 | Lee, et al.            |       |          |                               |
|                         | AC | 5,529,943          | 06/96 | Hong, et al.           |       |          |                               |
|                         | AD | 5,702,969          | 12/97 | Lee, Kang-yoon         |       |          |                               |
|                         | AE | 5,710,072          | 01/98 | Krautschneider, et al. |       |          |                               |
|                         | AF | 5,753,551          | 05/98 | Sung, JanMye           |       |          |                               |
|                         | AG | 5,840,591          | 11/98 | Park, et al.           |       |          |                               |
|                         | AH | 6,417,040 B2       | 07/02 | Noble, Wendell         |       |          |                               |
|                         | AI |                    |       |                        |       |          |                               |

## FOREIGN PATENT DOCUMENTS

|  |    | Document<br>Number | Date | Country | Class | Subclass | Translation |    |
|--|----|--------------------|------|---------|-------|----------|-------------|----|
|  |    |                    |      |         |       |          | Yes         | No |
|  | AJ |                    |      |         |       |          |             |    |
|  | AK |                    |      |         |       |          |             |    |
|  | AL |                    |      |         |       |          |             |    |

## OTHER REFERENCES (including Author, Title, Date, Pertinent Pages, Etc.)

|          |    |                 |  |
|----------|----|-----------------|--|
|          | AM |                 |  |
|          | AN |                 |  |
|          | AO |                 |  |
| EXAMINER |    | DATE CONSIDERED |  |

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609; Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.